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0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	DECLARATION	Attorney Docket	STAN/318/US
			First Named Inventor	Michael J. Williams, et al
		COMPLETE IF KNOWN		
		Application Number		
		Filing Date		
		Group Art Unit		
		Examiner Name		
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing		<input type="checkbox"/> Declaration Submitted after Initial Filing		

As an above named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Key Track System

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) _____ as United States Application or PCT International Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Codes of Federal Regulations, §1.56.

I hereby claim foreign priority under Title 35, United States Code § 119 (a)-(d) or § 365 (b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119 (e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §385(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Title Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplementary priority sheet attached hereto:

As a named inventor, I hereby appoint the registered practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office therewith, and direct that all correspondence be addressed to that Customer Number:

Firm Name:

Alix, Yale & Ristas, LLP

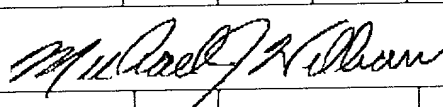
Customer Number:

002543

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

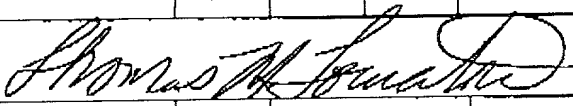
Name of Sole or First Inventor

☐ A petition has been filed for this unsigned inventor

Given Name	Michael	Middle Initial	J.	Family Name	Williams	Suffix	
Inventor's Signature					Date	2-28-02	
RESIDENCE: City	Glastonbury	State	Connecticut	Country	06033	Citizenship	United States of America
POST OFFICE ADDRESS	144 Hampshire Drive						
City	Glastonbury	State	Connecticut	Zip	06033	Country	United States of America
						Applicant Authority	

Name of Additional Joint Inventor, if any:

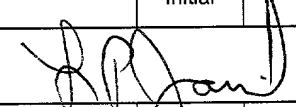
☐ A petition has been filed for this unsigned inventor

Given Name	Thomas	Middle Initial	M.	Family Name	Tornatore	Suffix	
Inventor's Signature					Date	2-28-02	
RESIDENCE: City	Enfield	State	Connecticut	Country	06082	Citizenship	United States of America
POST OFFICE ADDRESS	162 Brainard Road						
City	Enfield	State	Connecticut	Zip	06082	Country	United States of America
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name		Leon			Middle Initial		P.		Family Name		Janik			Suffix									
Inventor's Signature												Date		1/25/02									
RESIDENCE: City		Suffield			State		Connecticut			Country		06078			Citizenship		United States of America						
POST OFFICE ADDRESS		879 North Street																					
City		Suffield			State		Connecticut			Zip		06078			Country		United States of America			Applicant Authority			

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name					Middle Initial				Family Name					Suffix									
Inventor's Signature												Date											
RESIDENCE: City					State					Country					Citizenship								
POST OFFICE ADDRESS																							
City					State					Zip					Country					Applicant Authority			

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
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Inventor's Signature												Date											
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POST OFFICE ADDRESS																							
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Given Name					Middle Initial				Family Name					Suffix									
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Inventor's Signature												Date											
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POST OFFICE ADDRESS																							
City					State					Zip					Country					Applicant Authority			

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